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CONFIRMATION NO. 4637

Bib Data Sheet

|                             |  |              |                        |                                      |
|-----------------------------|--|--------------|------------------------|--------------------------------------|
| SERIAL NUMBER<br>10/807,743 | FILING OR 371(c)<br>DATE<br>03/24/2004<br>RULE | CLASS<br>361 | GROUP ART UNIT<br>2835 | ATTORNEY<br>DOCKET NO.<br>5681-74100 |
|-----------------------------|--|--------------|------------------------|--------------------------------------|

**APPLICANTS**

David K.J. Kim, San Jose, CA;

*None, t*  
*None, t*

**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 06/04/2004

|                                 |  |   |                     |                    |                         |
|---------------------------------|--|---|---------------------|--------------------|-------------------------|
| Foreign Priority claimed        | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no                                    | STATE OR COUNTRY<br>CA                                      | SHEETS DRAWING<br>4 | TOTAL CLAIMS<br>14 | INDEPENDENT CLAIMS<br>2 |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after | Allowance<br><i>Joseph W. Dugay</i><br>Examiner's Signature | Initials            |                    |                         |

**ADDRESS**

35690

**TITLE**

Slot frame with guide tabs for reducing EMI gaps

|                            |   |   |
|----------------------------|---|---|
| FILING FEE RECEIVED<br>770 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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